



Florida Family Child Care Home Association
Quarterly Full Board Meeting
& Quarterly Training
February 5-7th Weekend Agenda
Ocala, Florida

Friday, February 5, 2010

7:30pm – 10:00pm **FFCCHA Executive Board Meeting**
Best Western Hotel, Room #218 on 2nd floor

Saturday, February 6, 2010

8:00am-5:00pm All meetings are held at Child Development Services (CDS) Building

8:00am-9:00am **Area Rep, Chapter Rep, & Latino Council Meetings**

9:15am-10:15am **First Time Attendees, Committees, and Executive Board Meetings**

10:30am – 5:00pm FFCCHA FULL BOARD Quarterly Meeting

7:00pm – 9:00pm **Conference Team Meeting**
Best Western Hotel, Room #218 on 2nd floor

8:00pm -10:00pm **Chapter Meet and Greet**
Best Western Hotel, Room by Pool, refreshments

Sunday, February 7, 2010

8:00am – 12:00pm **FFCCHA Quarterly Training***
“Nursery Rhymes from A to Z” presented by Beverly Oglesby
Child Development Services (CDS) Building
(\$25 scholarships available!)

*CEU’s are available at the training for a \$20 fee. Please contact Lisa Anes or Judie Kellough for forms and more information. Remember to arrive at 7:45am at the CDS building to sign-in. Training starts promptly at 8am!

2 Locations

Best Western Hotel, I-75, Exit 350 West
3701 SW 38th Ave. Ocala, FL 34474
352-237-4848

Child Development Services, Exit 354 East
(CDS) Building in Skylark Plaza
1601 NE 25th Ave. Ocala, FL 34470

Driving Directions from Best Western to CDS:

Allow 20 minutes for driving time.

1. Go **North** on **I-75** for **3.5** miles to **exit 354**, US 27 S (two exits north of the hotel)
2. Make a **right** at exit 354, continue **east** about **5 miles** until Shell station on L. corner
3. Turn **left** on **N.E. 25th Ave.** and go north a very short distance
4. Turn **right** into the **Skylark Plaza** and CDS building is on left or north end.



February 5 & 6 , 2010
FFCCHA Quarterly 2010 Hotel Application
Best Western Hotel



3701 S W 38th Ave. Ocala, FL (off 1-75 exit 350 go west)

Hotel reservations are for two (2) nights (Friday evening February 5th & Saturday evening February 6th) while you are attending the FFCCHA full board meeting and training at the CDS building. To qualify for hotel room reservations, recipients must **be a FFCCHA full member, stay both Friday and Saturday nights, pre-register for training, attend the State Full Board Meeting on Saturday, February 6, 2010 and be in attendance for the entire training provided on Sunday, February 7, 2010.**

Please complete **both** forms and I **must have them no later than January 23, 2010**. Reservations **must be made by FFCCHA!** The money that is due **must accompany this form** or the application will not be accepted. Room reservations will **NOT** be made without all forms and the proper money submitted. Applications will be accepted on a first come, first served basis. There will be two (2) people per room and roommates **will be assigned**. Please list your roommate preference below if you select Option 1. All considerations will be taken in order to meet your request. You will be notified when your application is approved.

Hotel Reservations for February 5 & 6, 2010

(Check all that apply)

Option 1 (Two people to a room)

Using the scholarship, each person will only **pay \$65.00** to stay two nights at the hotel.

Option 2 (single Occupancy or Family Room)

Using the scholarship, you will **pay \$130.00** to stay two nights at the hotel.

Your Name: _____ Roommate Name: _____

Email: _____ Email: _____

Please Read The Following Statement ----- Sign & Date!

I, the undersigned, do hereby state: the above information is correct to the best of my understanding. I understand that these rooms are being paid for with FFCCHA, Inc. money. Friends and family members may **NOT** use this room, unless I have chosen option # 2. I understand that I will be assigned a roommate.

I understand if I do not attend the full board meeting and the entire training, I will be responsible for the **full cost** of my hotel room. I understand my reservations will be voided if I do not abide by the guidelines of this contract.

Signature: _____ Date: _____

Mail this completed form (full page), with your check, if applicable, made out to: **FFCCHA, Inc.**
C/O Judie Kellough 6715 Renee Terrace Jacksonville Florida 32216

Any questions please don't hesitate to contact: **Judie Kellough at 1-904-725-3544.**

Only completed forms with payment will be accepted and all deadlines will be strictly adhered to!

If you need an accommodation because of a disability in order to participate in the child training process, contact Judie Kellough at least two weeks prior to the first training date at 904-725-3544 between the hours of 9am and 6pm, Monday through Friday.

Completed forms will be dated as recieved, in case we exceed the allotted amount of FFCCHA room block. All providers will be notified by January 29, 2010 of their acceptance. Confirmation of your hotel reservations and scholarships will be provided by e-mail address.

For Office Only: Date Rec'd Check # Cash Money Order Amount \$ **Scholarship: Approved / Denied**



FFCCHA Professional Development Training Application

February 7, 2010



Time: 8:00am – 12:00pm

Location: CDS (Child Development Services) Building, 1601 N. E. 25th Ave. Ocala, FL 34470

Registration Fee: \$25.00 (scholarships available)

Make check payable to: **FFCCHA, Inc.**

Please submit this completed form with payment to: FFCCHA c/o Judie Kellough
6715 Renee Terrace
Jacksonville, FL 32216

Deadline: Must be received by January 23, 2010

Please Print:

Name: _____ Date: _____

Address: _____

City: _____ Zip: _____ County: _____

Phone #: _____ Fax #: () _____

E-mail Address: _____ @ _____

Chapter _____

YOU MUST BE PRESENT THE ENTIRE TRAINING SESSION IN ORDER TO RECEIVE A CERTIFICATE.

Workshop for everyone! PLEASE NOTE: Arrive as early as 7:30-7:45am to sign in.

Training starts promptly at 8am!

____ **Nursery Rhymes from A to Z**

Presenter: Beverly Oglesby

Beverly Oglesby, retired kindergarten Teacher of the Year and Past President of SECA, energetically presents teaching the Alphabet using Nursery Rhymes from A to Z with art projects, music, and fun ways to reinforce children’s learning of the alphabet.

CEU credits will be available for FFCCHA training classes for an additional \$20 fee. A separate CEU application can be paid for just prior to class and completed on the day of training. Arrive 15 minutes early.

____ Please check if applying for a training scholarship. *(must fill out form below - if applying for a training scholarship do **not** send money for training – to qualify for scholarship you must be a member of FFCCHA and a Licensed or Registered Provider*

Training Scholarship Application *If you are applying for a scholarship, please explain in a minimum of 50 words why you want to take this training and how you plan on using it in your family child care home business. Please write neatly on lines below only.*

If you need an accommodation because of a disability in order to participate in the child care training process: contact Judie Kellough at least two weeks prior to the first training date at 904-725-3544 between 9am and 6pm Monday through Friday.

The deadline is January 23, 2010. There will be NO refunds after this deadline. If you do not attend this training, the training fees will not be refunded or transferred to another person.